CSNC DEPT. OF SURG.

NO. 858

PATENT (U.S.A.)

PATENT (Ú.S.A.) ATTORNEY'S DOCKET NO.: 81476-255373



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the original, firs inventors are no STEM CELLS E Which is descrithe att X the spas as am	ned inventor, I declare that the infit and sole inventor if only one nare amed below at 1-4, of the inventional Image of the inventor of the image of th	ne is listed at 1 below, or a nentitled: <u>METHOD FCA/MHC GENE PRODUCT</u> No. 09/852,458 filed	a joint inventor if plural DR THE ISOLATION OF MARKER May 9, 2001
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l acknowledge	my duty to disclose information wi	nich is material to the exam	nination of this application
in accordance v	vith Title 37, Code of Federal Reg	ulations § 1.56(a).	•
I hereby state the including the cla	nat I have reviewed and understar aims, as amended by any amendr	nd the contents of the abovenent referred to above.	e identified specification,
application(s) for	oreign priority benefits under Title or patent or inventor's certificate list ion for patent or inventor's certific y is claimed:	sted below and have also i	dentified below any
•	PRIOR FOREIG	N APPLICATION(S)	
			PRIORITY
COUNTRY	APPLICATION NUMBER	DATE OF FILING	CLAIMED UNDER
		Month Day Year	35 U.S.C. 119
		•	YES NO
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application(s) lis is not disclosed Title 35, United defined in Title :	the benefit under Title 35, United Sted below and, insofar as the sub- in the prior United States applicated States Code § 112, I acknowledge 37, Code of Federal Regulations, ation and the national or PCT inter-	ject matter of each of the or tion in the manner provided the duty to disclose mate § 1.56(a) which occurred b	claims of this application d by the first paragraph of trial information as between the filing date of
(Application Ser	ial No.) (Filin	g Date)	(Status)

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Send corresp ndence t: PILLSBURY WINTHROP LLP 725 South Figueroa, Suite 2800 Los Angeles, CA 90017-5406

DIRECT TELEPHONE CALLS TO: Richard H. Zaitlen (213) 488-7100

				, 	
	LAST NAME LOS-PAGELS	FIRST NAME	MIDDLE NAME	Residence:	
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	AVITAL	ITZHAK			
	Post Office Address Franklin Av	7200, Apt 22	2, Los-Angole	s,CA 90046	CITIZENSHIP ISRAEL
	LAST NAME	FIRST NAME	MIDDLE NAME	Residence:	
2				CITY	STATE or COUNTRY
•	ARNAOUT				
	Post Office Address				CITIZENSHIP
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	LAST NAME	FIRST NAME	MIDDLE NAME	Residence:	
3				CITY	STATE or COUNTRY
	INDERBITZIN	DANIEL			
	Post Office Address				CITIZENGUID
					CITIZENSHIP
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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF ATZHAK AVITAD	SIGNATURE OF WALID ARNAOUT
DATE 12/7/01	DATE
SIGNATURE OF DANIEL INDERBITZIN	
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DATE	

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stated below ne	ext to my name.		
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I hereby state the including the cla	nat I have reviewed and understan nims, as amended by any amendr	d the contents of the aborent referred to above.	ve identified specification,
application(s) for		ated below and have also ate having a filing date be	Identified below any
	PRIOR FOREIGN	NAPPLICATION(S)	
COUNTRY	APPLICATION NUMBER	DATE OF FILING Month Day Year	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES NO
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application(s) listing is not disclosed Title 35, United defined in Title	he benefit under Title 35, United S sted below and, insofar as the sub- in the prior United States applica States Code § 112, I acknowledg 37, Code of Federal Regulations, ation and the national or PCT inter	ject matter of each of the tion in the manner provide e the duty to disclose mat § 1.56(a) which occurred	claims of this application ed by the first paragraph of terial information as between the filing date of
(Application Se	паl No.) (Filin	g Date)	(Status)

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ATTORNEY'S DOCKET NO.: <u>81476-255373</u>

S nd correspond nce to: PILLSBURY WINTHROP LLP 725 S uth Figu roa, Suite 2800 Los Angeles, CA 90017-5406 DIRECT TELEPHONE CALLS TO: Richard H. Zaiti n (213) 488-7100

1	LAST NAME	FIRST NAME	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
	AVITAL	ITZHAK			
	Post Office Address				CITIZENSHIP
	LAST NAME	FIRST NAME	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
2	ARNAOUT	WALID			_ ·
•	Post Office Address				CITIZENSHIP
	LAST NAME	FIRST NAME	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
3	INDERBITZIN	DANIEL		ZURICH	SWITZERLAND
	Past Office Address REGULASTRAS	SE15; CH-	8046 ZURICI	4; SWITH	CITIZENSHIP ERCAND SWISS
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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF ITZHAK AVITAL	SIGNATURE OF WALID ANAOUT
•	
DATE	DATE
SIGNATURE OF DANIEL INDERBITZIN	
DATE Bosember 7th 2001	

PATENT (U.S.A.)

DECLARATION
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ATTORNEY'S DOCKET NO .: 81478-255373

in onginal, first inventors are not strength of the strength o	ned inventor. I declare that the information and sole inventor if only one name amed below at 1-4, of the invention BY IMMUNO-LABELING WITH HE ibed and claimed in: tached specification or pecification in application Serial sended on patent is sought, and that my resident to my name.	ne is listed at 1 below, or in entitled: <u>METHOD F</u> A/MHC GENE PRODUC No. 09/852,458 filed dence, post office addres	a joint inventor if plural OR THE ISOLATION OF T.MARKER May 9, 2001 as and citizenship are as
i acknowledge	my duty to disclose information wh	ich is material to the exam	nination of this application
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I hereby state the claim of the	hat I have reviewed and understan aims, as amended by any amendn	d the contents of the abound to above.	ve identified specification,
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COUNTRY	APPLICATION NUMBER	DATE OF FILING Month Day Year	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES NO
l hereby claim t	he benefit under Title 35, United S	tates Code & 120 of any	YES NO
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(Application Ser	rial No.) (Filing	Date)	(Status)

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1	LAST NAME	FIRST NAME ITZHAK	MIODLE NAME	Residence: CITY	STATE or COUNTRY
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3	LAST NAME	FIRST NAME	MIDDLE NAME	Residence: CITY	STATE or COUNTRY
٦	INDERBITZIN	DANIEL			
	Post Office Address				CITIZENSHIP
	•		•		

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF ITZHAK AVITAL	SIGNATURE OF WALID ARNAOUT
DATE	DATE /2/10/01
SIGNATURE OF DANIEL INDERBITZIN	
DATE	

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Applic	ant or F	Patentee:	ITZHAK A	VITAL, et al.	JAN 1	1 2002 ED	ocket No.	81476-255373	E S
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l hereb	by decla	are that I ar	n an official	empowered to	act on behalf	of the nonp	rofit organia	zation identified t	pelow:
				<u>CEDARS-SI</u> ON <u>8700 Be</u>			eles, CA 90	0048	
TYPE	OF OR () (X) (.) ()	Tax Exen Nonprofit Name of Would Qu located in Would Qu America i	or Other Institute of Other Institute of State	Exempt Under States of Amer profit Scientific the United Sta	e Service Cod nder Statute (Cit Internal Revolica c or Education tes of America	e (26 USC 5 of State of the ation of State enue Service nal Under State a	he United S tute e Code (26 atute of Sta	501(c)(3)) tates of America USC 501(a) and te of the United S	501(c)(3)), if States of
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I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. 1.28(b)).

I hereby declare that all statements made her in of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements wer made with the knowl dg that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING

Peter E. Braveman, Esq.

TITLE OF PERSON OTHER THAN OWNER

Senior Vice-President for Legal Affairs

ADDRESS OF PERSON SIGNING

8700 Beverly Boulevard, Los Angeles, CA 90048

SIGNATURE